MDR: M4-04-0834-01

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled <u>Medical Dispute Resolution-General</u>, and 133.307, titled <u>Medical Dispute Resolution of a Medical Fee Dispute</u>, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on September 17, 2003.

I. DISPUTE

Whether there should be reimbursement for out-of-pocket expenses for prescription medications for dates of service September 27, 2002 through September 10, 2003.

II. FINDINGS

Per Rule 133.307(d)(1) dates of service August 2, 2002 through August 30, 2002 are not within the jurisdiction of Medical Review as they are outside the 365-day filing deadline.

The respondent submitted a TWCC-21 denying medical treatment for the cervical spine as not part of the original injury. Submitted medical records support treatment and prescription medications are for the compensable knee injury.

III. RATIONALE

EOB's were not submitted by either party; therefore, this dispute will be reviewed as a general fee dispute.

For date of service September 10, 2003 the submitted paid receipts do not specify which prescriptions were filled nor does the table of disputed services indicate the prescriptions filled; therefore, this date of service cannot be reviewed.

The letter of medical necessity and surgeons' letter are prior to the dates of service in dispute and do not appear to address the current symptomology. According to Texas Workers' Compensation Commission Rule 133.307 (f)(3), a copy of any EOB relevant to the dispute, or, if no EOB was received, convincing evidence of carrier receipt of employee request for reimbursement. Requestor has not submitted evidence that a request for reimbursement was made to the insurance carrier. Reimbursement is not recommended.

IV. DECISION

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor is not entitled to reimbursement for out-of-pocket expenses for prescription medications

The above Findings, Decision and Order are hereby issued this 06th day of January 2004.

Marguerite Foster Medical Dispute Resolution Officer Medical Review Division

MF/mf